

activating the at least one ultrasonic transducer to direct the focused ultrasound into the cardiac tissue to ablate the cardiac tissue.

116. The method of claim 115, wherein:
the activating step is carried out to electrically isolate one part of the heart from another part of the heart.

117. The method of claim 115, wherein:
the providing and activating steps are carried out with the focused ultrasound being focused along a focal axis and diverging when viewed perpendicular to the focal axis.

a 118. The method of claim 115, further comprising the step of:
moving a focus of the focused ultrasound relative to the cardiac tissue.

119. The method of claim 118, wherein:
the moving step is carried out to move the focus closer to a near surface of the cardiac tissue.

120. The method of claim 115, wherein:
the providing step is carried out so that at least 90% of the focused ultrasound passes within a focus area defined by a focal length of about 2 to 20 mm and an angle of about 10 to 170 degrees when viewed along a focal axis.

121. The method of claim 115, wherein:
the providing step is carried out with the focused energy being emitted by a concave surface.

122. The method of claim 115, wherein:
the providing step is carried out with the concave surface being attached to a piezoelectric transducer.

123. The method of claim 122, wherein:
the providing step is carried out with the concave surface having a focal length of
2-20 mm.

124. The method of claim 123, wherein:
the providing step is carried out with the focused energy having a focal length of 2
to 12 mm.

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125. The method of claim 115, wherein:
the activating step is carried out by activating the ultrasonic transducer for a first
period of time at a first frequency and a second period of time at a second frequency which is
different than the first frequency and occurs after the first period of time.

126. The method of claim 125, wherein:
the activating step is carried out with the first frequency being lower than the
second frequency.

127. The method of claim 126, wherein:
the activating step is carried out with the first period of time being shorter than the
second period of time.

128. The method of claim 127, wherein:
the activating step is carried out with the first period of time being less than 1
second.

129. The method of claim 125, wherein:
the activating step is carried out with the ultrasonic transducer being activated at
the first frequency for a number of discrete time periods.

130. The method of claim 125, wherein:
the activating step is carried out with the ultrasonic transducer being inactive for
3-8 seconds between each of the number of discrete time periods.

131. The method of claim 115, further comprising the step of:
approximating a temperature of the tissue.

132. The method of claim 115, further comprising the step of:
assessing the adequacy of contact between the device and the tissue.

133. The method of claim 115, further comprising the step of:
determining a tissue layer thickness using the ultrasound transducer.

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134. The method of claim 133, wherein:
the determining step is carried out with the tissue layer being a tissue layer
between a near surface and a far surface.

135. The method of claim 133, wherein:
the determining step is carried out with the tissue layer being a fat layer which lies
over a muscle layer.

136. The method of claim 115, further comprising the step of:
measuring a blood flow velocity with the ultrasonic transducer.

137. The method of claim 115, further comprising the step of:
moving the a focus of the focused ultrasound relative to the tissue.

138. The method of claim 137, wherein:
the moving step is carried out with the ultrasonic transducer being translated so
that the focus remains at approximately the same depth relative to the tissue.

Q1 139. The method of claim 115, wherein:
the providing step is carried out with the ablating device having a number of
ultrasonic transducers.

If the Examiner believes a telephone conference would expedite the prosecution
of this application, the Examiner is invited to telephone the undersigned at 415-412-3322.

Respectfully submitted,

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